



STATE
OF
GEORGIA

Application for
RECORDS DISPOSITION STANDARD

OFFICE OF SECRETARY OF STATE
DEPARTMENT OF ARCHIVES & HISTORY
RECORDS MANAGEMENT DIVISION

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73-130

1. Application Date Jan. 24, 1973	INSTRUCTIONS: See separate instructions for completion of front and reverse of this form. Sign original and two copies and forward to Department of Archives and History, Attention: Records Management Officer.	FOR RECORDS MANAGEMENT DIVISION USE	
2. Agency Application No. DHR-PH-2		Date Received JAN 26 1973	Date Completed FEB 27 1973
3. AGENCY, Division, Subdivision & Administering Office Address Department of Human Resources Division of Physical Health Epidemiology Unit, Veterinary Section Room 13-H 47 Trinity Avenue Atlanta, Georgia		4. Person to Contact Dr. J.E. McCroan	
		5. Working Title Unit Director	6. Tel. No. 656-4764

7. ACTION REQUESTED

☒ ESTABLISH DISPOSITION STANDARD;
RECORD WILL CONTINUE TO ACCUMULATE. ☐ DISPOSE OF PRESENT ACCUMULATION;
NO FURTHER ACCUMULATION ANTICIPATED.

8. Earliest & Latest Dates of Series 1960 to date	9. Exact Series Title Case Rabies History/Record Files
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10. What is the function of the office in which this record series is created?

The Veterinary Section of the Epidemiology Unit is responsible for providing medical and non-medical consultation to medical and non-medical personnel for the treatment of rabies, consultation of reports and statistics for Federal Health Agencies regarding the evidence of rabies, consultation to possible rabid victims, providing serum for rabid victims bitten by rabid animals, the issuing of vaccination registration tags (dog tags) for veterinarians and maintenance of records developed by testing for rabies in animal specimens.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Documents relating to determinations of the necessity of treatment for possible rabid victims.

Includes: an Animal History form giving the history of the animal involved, results of laboratory tests conducted on it; also, in some cases, a Rabies Consultation form providing the identity of the victim, recommendations for treatment of the victim and information about the animal involved.

File is arranged alphabetically by name of person who reported the incident (victim, owner of animal, medical doctor, veterinarian etc.).

ATTACH SAMPLES OF THE FILE

12. EQUIPMENT OCCUPIED	No. of Drawers	Cu. Ft. of Records	ANNUAL RATE OF ACCUMULATION	No. of Drawers	Cu. Ft. of Records
Letter-size File Drawers	2	3		1	1 1/2
Legal-size File Drawers			Floor Space Occupied (Square Feet)	In Office(s)	In Storage Area(s)
4 transfer files		8		7	
			AVERAGE DAILY REFERENCES	This Year's	Last Year's
				8	0
					0
					0

QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain

YES NO

13. Is this the Record Copy of the series? ☒ [] []
14. Is there a duplication of this series in another office or agency? [] ☒ []
15. Is the information contained in this series ever summarized or published?
Attach copy of summary or publication. [] ☒ []
16. Does the series contain classified information requiring security handling? [] ☒ []
17. Does the series initiate, amend or terminate agency policies and procedures? [] ☒ []
18. Could the function be performed if the files were lost or destroyed? ☒ [] []
19. Is the series (or major portion of it) regularly microfilmed? If yes, why? [] ☒ []
20. Does the record series provide data as input to an EDP file? [] ☒ []
21. Does the record series contain documentation produced as EDP printout? [] ☒ []
22. Has the Federal Government issued instructions governing the retention/disposition of these files? [] ☒ []
23. Will there be a need for these records 10, 15 years from now? If yes, what? [] ☒ []

24. REQUIREMENTS. The following requires the files to be kept -----5----- years:

- a. [] STATE LAW b. [] STATUTE OF LIMITATION c. [] AUDIT PERIOD d. [] FEDERAL LAW e. ☒ ADMINISTRATIVE DECISION f. [] HISTORICAL VALUE
(Cite Law, Statute, or other reason for the retention requirement)

Dr. R.K. Siles to provide information service to medical or health personnel in regard to possible side effects of rabies treatment.

25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at the end of each - ☒ CALENDAR YEAR - [] FISCAL YEAR - [] OTHER _____, then:

- ☒ Hold in the current files area _____ month(s)/ _____ year(s):
- ☒ Transfer to ☒ State Records Center [] Local Holding Area; hold 4 year(s):
- ☒ Destroy.
- [] Transfer to State Archives for permanent retention.
- [] Destroy immediately after cut-off.
- [] Other: (Specify)

(Indicate briefly rationale for recommendations above/or write additional remarks):

Records Management Officer (Signature)	Date	OTHER REQUIRED SIGNATURES	DATE
<i>Douglas M. H. ...</i>	1-24-73		
26. Recommendations in paragraph 25 are:	Agency Head/Designee <i>RKS</i> [] Approved [] Disapproved	<i>J.E. McLean</i>	Jan 23, 73
	State Auditor/Designee [] Approved [] Disapproved	<i>William M. Dixon</i>	2-13-73
	Secretary of State/Designee [] Approved [] Disapproved	<i>Carroll Hart</i>	Feb 13 73
	Attorney General/Designee [] Approved [] Disapproved	<i>R. M. H. ...</i>	2-26-73

STATE RECORDS
COMMITTEE